



# The Coalition Quarterly

Advocacy • Information • Outreach

MAR • APR • JUNE - SECOND QUARTER EDITION



## NEWS & FEATURES



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## EXECUTIVE DIRECTOR'S CORNER

**Michelle Rafeld**

It's hard to believe we're halfway through 2024 as it seems like just yesterday we convened for the 2023 Annual Meeting. The first half of the year was a whirlwind of brainstorming, teamwork, and hard work and I'm both thrilled and amazed by what our small, but mighty, Coalition team accomplished the first six months of the year.

One of our most recent accomplishments was the successful hosting of our June mid-year member meeting in Kansas City, Missouri. A fantastic time was had by all, and the positive energy was exhilarating! A heartfelt thank you to the 100 members who attended, the dynamic speakers who provided their perspectives on new trends, challenges, and approaches to fighting insurance fraud, and most importantly, to the Coalition team, who dedicated a significant amount of time and effort to organizing the event.

In planning for the midyear meeting, we decided to introduce some subtle changes, such as a video showcasing the important work and achievements of our committees and task forces, added presentations on trending topics, and an enhanced board book. As part of revitalizing our board book, we integrated information on recent Coalition achievements, upcoming anti-fraud events, and advertisements from law firms and associate members eager to showcase their services and expertise. We hope our members were impressed by the changes made and found the additional information valuable.

One notable accomplishment highlighted in our board book was the outcome of the Coalition's collaboration with the California Department of Insurance (CDI) regarding a proposed legislative change. Based on member input, CDI decided not to pursue proposed legislative changes and proactively implemented three constructive suggestions from our members. The changes CDI made pertain to California's SIU Annual Report deadline, the insurer vehicle inspection mandate, and the SIU non-compliance penalty process. This achievement underscores the significant role the Coalition plays in facilitating open communication between our diverse member groups.

In addition to preparing and hosting our mid-year meeting, the Coalition team has been dedicating a significant amount of time to strategic planning. We look forward to developing new and innovative initiatives to advance the organization's priorities of sustainability, brand optimization, and value proposition, using the valuable feedback gathered through this year's member survey as our guide.

I'm also excited to report that efforts are underway to launch the State of the Insurance Fraud Technology Study sometime within the next quarter. This study, being conducted in partnership with

Shift Technologies, will focus on insurer use of anti-fraud technology, strategies in the technology era, and plans for enhancing technology resources. We look forward to sharing the results of the study with our members at the end of the year, as well as kicking off a third study, with the help of PwC, on the use of AI by insurers and fraudsters.

As one of the leading authorities on insurance fraud, the Coalition is often asked to present during anti-fraud awareness events. To date, Brent Walker and I, alongside Dominic Dugo and several members of our Speakers Bureau, have participated in 26 external events, highlighting the Coalition’s efforts and pivotal role in the fight against insurance fraud. We’ve shared valuable information regarding emerging fraud trends with reporters, regulators, industry representatives, trade associations, legislative officials, and consumers nationwide, furthering our education and advocacy efforts.

One event I had the honor of showcasing our organization’s mission and efforts at was the IASIU European Conference held in Rome, Italy this past June. I’ll be doing the same in November, when I attend the Global Insurance Fraud Summit in Singapore. With both events looking to foster communication amongst insurance fraud fighters worldwide, and the Coalition serving on the Global Insurance Fraud Summit’s Executive Committee, we should be proud as an organization to play a role in facilitating more robust communication among anti-fraud leaders globally!

Our success as an organization is the result of our combined efforts so thank you to our success thus far in 2024! Together, we’re not only shaping the future of our organization but also strengthening the global effort to combat insurance fraud. I look forward to us continuing to collaborate and lead the charge with the same passion and dedication that has brought us this far so here’s to a successful and impactful second half of the year!

Sincerely,

*Michelle Rafeld*

Michelle Rafeld  
Executive Director  
Coalition Against Insurance Fraud







We are absolutely thrilled to announce that the 2024 Coalition Against Insurance Fraud event in Kansas City, Mo., has wrapped up with an exceptional turnout! With well over 100 dedicated members and their organizations in attendance, the event was a resounding success and a true testament to the commitment and passion within our community.

This gathering was nothing short of remarkable, bringing together a wealth of subject matter expertise from across the industry. The vibrant discussions that took place delved into the most pressing issues in insurance fraud today. These insightful exchanges have armed us with invaluable perspectives on how fraudsters are evolving, ensuring that we stay ahead of the curve and continue to protect our industry effectively. Executive Director Michelle Rafeld and the Coalition staff extend their heartfelt gratitude to everyone who attended. Your presence and participation were vital to the event's success, and we couldn't have done it without you.

We would also like to extend a special acknowledgment to our 25 elite presenters who traveled from near and far to contribute to this groundbreaking event over the past two days. Their expertise and dedication made a significant impact, and their presentations covered a wide range of topics crucial to our collective fight against insurance fraud. Their insights and shared knowledge have undoubtedly equipped us with new tools and strategies to tackle the challenges ahead.

Click to view the [Committee and Task Force video](#) that went over extremely well with our members! It was entertaining and very informative! Don't miss watching it and get up to speed on their amazing accomplishments!

Our 2024 Midyear Meeting would not be the amazing success with these esteemed presenters who were:

- *Erik Charlick, California DOI*
- *Ross Silverman, Chair, Katten Muchin Rosenman LLP*
- *Vince Gerbino, Bruno, Gerbino, Soriano & Aitken*
- *Vince Albers, AON*

- *Steve Jarrett, Westfield Insurance*
- *Tim Hopper, Sentry Insurance*
- *Mariela Pennock, Assurant*
- *Lin Werkheiser, Command Investigations*
- *Ryan Malone, Travelers SIU*
- *Arteniece L. Lee, Horace Mann Insurance*
- *Kevin Glasgow, Diligence International Group, LLC*
- *Craig Koerner, Farmers Insurance Exchange*
- *Richard Matarante, New York Life Insurance*
- *Dominic Dugo, VP-Delta Group*
- *Nikki Soriano, IASIU*
- *Greg Welker, NAIC*
- *Jay Bobrowsky, AFA*
- *Ed Tobin, NICB*
- *Chris Sloan, Pennsylvania IFPA*
- *Brenda Cude, NAIC Consumer*
- *Frank Sztuk, NYAAIF*
- *Jeff Ferrand, illumifin*
- *Micki Lockard, CNA*
- *Nicholas Hamm, N.J. Property-Liability Insurance Guaranty Assoc.*
- *Kathy Stokes, AARP*

Your contributions were invaluable, and your willingness to share your knowledge and insights has helped to elevate our collective understanding and approach to combating insurance fraud.

Thank you once again to everyone for making the 2024 Midyear Meeting an outstanding success. Your dedication and collaboration are what make these events so impactful, and we look forward to continuing this momentum as we advance our mission to fight insurance fraud together. Here's to many more achievements and milestones in the months ahead!





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**Three New Members Have Joined Since The Last Quarter...**

*Please Welcome...*

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*FUZION*





## 2025 Membership Meetings

Planning is underway for the Midyear and Annual Meetings slated for 2025. Following feedback from our membership survey, several locations have emerged as leading candidates for the Midyear Meetings. Requests for Proposals (RFPs) have been sent to multiple hotels, aligning with the input gathered from survey participants.

## New Committees and Task Forces

The Coalition has recently launched two new committees and task forces aimed at tackling critical issues in insurance fraud. **The Property & Casualty (P&C) Task Force**, co-chaired by Simon Blank (Florida Division of Investigative & Forensic Services) and Pranay Mittal (Travelers), will focus on enhancing strategies to combat fraud within this sector. **The Medical Fraud Task Force**, co-chaired by Junius Nottingham (BlueCross BlueShield) and Craig Koerner (Farmers Insurance), will concentrate on addressing fraudulent activities specific to medical claims. The Coalition is indeed demonstrating a proactive approach by expanding its efforts across different aspects of insurance fraud. This includes forming new committees and task forces aimed at sharing knowledge and strategies to combat fraudulent activities more effectively. By strengthening these initiatives, the Coalition highlights its commitment to safeguarding the integrity of insurance practices and addressing fraud in a collaborative manner. Stay updated as these efforts develop and evolve to tackle ongoing challenges in the insurance industry.



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## YOUR MEMBERSHIP REMINDER

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As a Coalition member, you have full access to all the perks of full membership, including registration for both the Midyear and Annual Meetings. In order to have access to all website features, please create a YourMembership profile. For assistance, contact Kendra Smith, Member Services & Events Manager, at [kendra@insurancefraud.org](mailto:kendra@insurancefraud.org).

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## UPCOMING MEETING

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**2024 Annual Membership Meeting**  
The Annual Meeting will be held at the Renaissance Arlington Capital View Hotel. Join industry peers during the holiday season to network, learn and unite in our shared goal of combating fraud!

**Registration Opens  
September 9, 2024**



Please Visit [insurancefraud.org](https://insurancefraud.org) to register and you must have a YM profile completed to register!





After helping to host our Midyear Meeting, Executive Director Michelle Rafeld attended the 2024 IASIU European Conference in Rome, Italy to help Represent not just the Coalition, but America's fraud fighting force as a whole. In addition, Rafeld was one of the speakers at IASIU's meeting in Ohio. Director of Government Relations, Brent Walker, served as one of the opening speakers for FIFEC's Annual Meeting while Michelle attended the IASIU conference in Rome Italy.



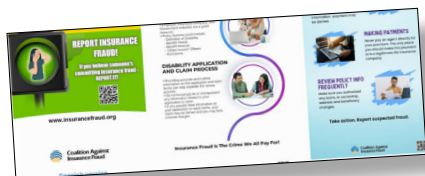
In addition to her attendance as a speaker in various meetings, Michelle Rafeld was also the subject of an interview with Quantexa on "Fraud for Thought". If you missed the interview, you can watch it on their Youtube channel [Click here](#).



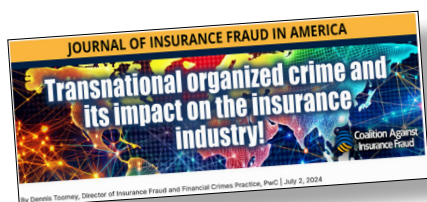
In addition to presentations, The Coalition is proud to support our fellow fraud fighting organizations, and we were more than happy to join NICB's Contractor Fraud Awareness Week and their ensuing social media campaign as a partner.



We are thrilled to announce an upcoming series of FraudPods hosted by Joseph Matos - Coaliton's Chief of Communication & Creative Services, featuring an exciting lineup of distinguished guests from our Coalition Members! Get ready to hear from industry leaders like *Aimee Stidham, of WCF Insurance, Simon Blank, from the Florida Dept. of Financial Services, our very own Executive Director Michelle Rafeld, Jay Bobrowsky, from the State Compensation Insurance Fund, Vince Gerbino of Bruno, Gerbino, Soriano & Aitken, LLP, and Matt Capece, Special Representative of the General President at the United Brotherhood of Carpenters & Joiners of America*, among others lining up. These episodes with subject matter experts are between 15 and 30 mins, dynamic insightful showcasing who our members are and what they do to keep insurance fraud at bay as they navigate through current trends. [Click here](#) to listen to previous *FraudPods*.



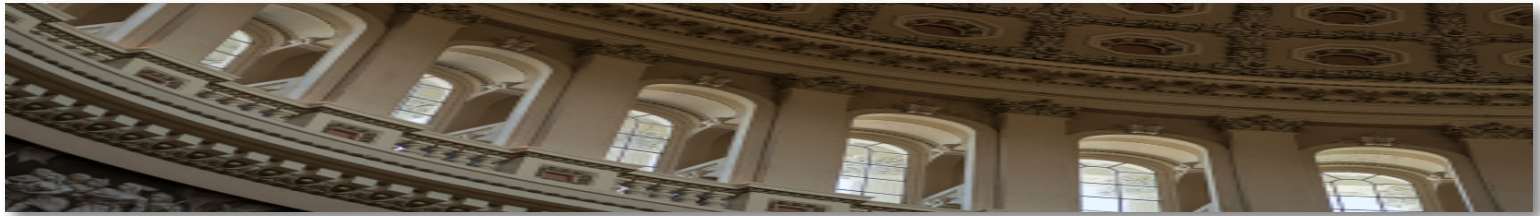
Infographics continue to be translated in Spanish for our members to utilize, the process will be on going. New infographics are currently in development. [Click here](#) to view infographics. Last quarter Armand Glick utilized the Coalition's creative services to help create a spanish language poster that will be converted into another useful infographic for our members in both languages.



A new *JIFA* has been submitted by Dennis Toomey, Director of Insurance Fraud and Financial Crimes Practice, PwC. [Click here](#) to view the latest and others. Two more *JIFA*'s are sccheduled for quarter three and four!



Exciting news! We are thrilled to announce that webinar planning is in full swing, with our first session focusing on the invaluable *Amicus* services the Coalition offers to its members. This informative webinar promises to deliver key insights and practical knowledge that you won't want to miss. Stay tuned and get ready to dive into a wealth of information and enhance your understanding of our vital *Amicus* services!



Most legislative sessions have now adjourned and within the context of the Coalition Against Insurance Fraud's 2024 legislative priorities, there were several key takeaways.

Of the 199 anti-fraud bills that the Coalition tracked, 32 bills have been enacted thus far.

The top-5 legislative priorities with the most activity this session include:

### **1. Insurer Use of Consumer Data and Technology**

Recognizing the need to balance fraud detection with consumer protections, the Coalition continued to work towards ensuring that data privacy laws protect consumer interests without restricting the proper investigation of insurance fraud.

Consumer data privacy related laws were enacted this session in Kentucky, Maryland, Nebraska, New Hampshire, New Jersey, Rhode Island, along with artificial intelligence (AI) amendments in Utah.

Related to AI, the NAIC Model Bulletin: Use of Artificial Intelligence Systems by Insurers has now been adopted by thirteen (13) states with four (4) additional states having their own AI-specific regulation or guidance.

The Coalition also tracked the implementation of enacted legislation. This includes tracking the implementation of Colorado regulation that seeks to ensure that insurer use of consumer data avoids unfair discrimination. The Coalition participated in the stakeholder calls on this topic and will continue to do so.

In addition, as the NAIC Privacy Protections Working Group considers a new path forward on a consumer data privacy model act, Coalition government relations director Brent Walker recently provided verbal comment to this group, emphasizing the need to balance consumer privacy protections with ensuring that any new or revised model language maintains the industry's ability to combat

insurance fraud, while staying in harmony with existing anti-fraud regulations, such as mandatory fraud reporting and good faith immunity.

### **2. Strengthen Anti-fraud Laws**

Stronger anti-fraud laws and regulations remain a priority for the Coalition. Enacted laws in 2024 include bills in Alabama that increase the statute of limitations for insurance fraud prosecutions and give law enforcement powers to Alabama's insurance department Insurance investigators. In Maryland, an enacted bill will increase the amount of civil penalties for unauthorized insurer violations, along with increasing the civil penalty that the Commissioner may impose for certain violations of an insurance producer license or public adjuster licensee in that state.

In addition, there is a package of anti-fraud bills pending in Michigan that have recently passed the House and will be considered by the Senate soon. Key components of the anti-fraud package, include sentencing guidelines for fraudulent insurance acts, data sharing agreements with NICB, introducing anti-kickback provisions within the Health Care False Claims Act, adding insurance fraud in the definition of racketeering, introducing civil penalties as an enforcement option, and mandatory fraud reporting requirements.

There are also several other states where the Coalition is involved or closely monitoring insurance fraud bureau and/or anti-fraud assessment funding.

### **3. Public Adjusting, Contractor Fraud Laws and Related Activity**

The Coalition continued to monitor bills related to public adjusters and repair contractors, along with legislation that ensured homeowner consumer protections.

A consumer protection bill enacted in Florida will require a roofer, executing a contract with a homeowner during a state of emergency, to include language in their contract



that the consumer may cancel that contract within 10 days if work has not yet begun. In Louisiana, a new law now adds any misrepresentation of the scope of property damages, whether made by the insured or insurer, to the definition of a fraudulent insurance act. Also in Maryland, a new law will prohibit public adjusters from soliciting after certain hours and requires a public adjuster to notify the insurance commissioner of all contracts executed during or within 72 hours after a loss. In Mississippi, a house bill became law and limits what a public adjuster may be entitled to when a settlement was offered or agreed to by the insured before a contract was executed. In addition, Mississippi public adjusters can no longer require that an insured issue a check only in the name of a public adjuster.

The Coalition also actively collaborates with the National Association of Public Insurance Adjusters on these issues.

#### **4. Litigation Financing Regulations**

This topic continues to headline industry and governmental events, and the Coalition has closely followed it with focus on the anti-fraud aspect of litigation financing. Several enacted bills of note include an Indiana enacted bill which defines a commercial litigation financier, prohibits commercial litigation funding from a foreign entity or country, and provides that a party may not disclose or share any documents or information subject to a court order to seal or protect it. A new law in Louisiana now creates increased transparency and limitations on foreign third-party litigation funding in that state, along with prohibiting a litigation funder from influencing litigation and making litigation financing agreements discoverable in all civil actions. Finally, West Virginia passed a bill that amends and reenacts the Consumer Credit and Protection Act. Specifically, this comprehensive bill prohibits referral fees, commissions, false advertising, influence of lawsuit decisions by litigation financiers. It also requires the disclosure of third-party litigation financing agreements under certain conditions.

A third party litigation funding (TPLF) subgroup was also formed from the Coalition's Government Affairs Committee to continue discussions around this topic. The Coalition is also monitoring efforts to pass an NCOIL Transparency in Third Party Litigation Financing Model Act, which is based, in part, on the West Virginia bill.

#### **5. Workers Compensation Anti-fraud Laws**

Several impactful workers compensation bills were also passed this session. One key example is a senate bill in

Oregon which made fraudulent misrepresentations of payroll information by an employer, in effort to reduce premiums, a crime.

In addition, the Coalition's Government Affairs Committee is working closer with subject matter experts from the Workers Compensation Task Force to identify legislative issues in that line of business.

Other key Coalition advocacy efforts this session include joint letters sent to lawmakers and co-signed by the Coalition and other key partners in Virginia to address towing fraud, participation in a panel discussion on anti-fraud compliance with two state regulators, and a memo to support tougher staged accident law in New York.

As it does annually, the Coalition's Government Affairs Committee will soon begin to identify legislative priorities for 2025. To learn more about any of these legislative efforts or share ideas for 2025 priorities, please contact Brent Walker, Director of Government Relations, [brent@insurancefraud.org](mailto:brent@insurancefraud.org).



The Legal Affairs Committee closely monitors Federal and state courts to identify major decisions affecting insurance fraud and ensures that the Coalition's databases of state laws and regulations are regularly updated as a valuable member reference tool. The

Legal Affairs Committee also supports our *amicus curiae* brief program: by identifying cases and often drafting Coalition *amicus* briefs. New this year, the Committee will also expand its role in assisting the *Amicus* Review Committee with intake considerations.

## Support for the Coalition's *Amicus Curiae* Program

In addition to working with Coalition members to identify matters potentially impacting their common interests in combatting fraud, the Legal Affairs Committee has been representing the Coalition as an *amicus curiae* in the following matters.

### *Amicus* opportunities in 2024 include:

#### ***Allstate v. Carteret Comprehensive Medical Care, et al.***

This *amicus* brief has been filed in the New Jersey Appellate Division. The case centers on the issue of whether affirmative insurance fraud cases, involving no-fault issues in New Jersey, should be sent to arbitration, with significant implications for the insurance industry and fraud prevention efforts. With far-reaching implications for insurers and the landscape of insurance fraud litigation, the outcome of this case holds immense significance. Allstate's appeal underscores the critical need for the Coalition's *amicus* intervention in shaping the legal discourse on this important matter. The involvement of the Coalition and its legal member, Bruno, Gerbino, Soriano & Aitken, LLP, could prove instrumental in influencing the appellate judges' decision and steering the course of future no-fault insurance fraud litigation in New Jersey.

#### ***State Farm Mut. Auto. Ins. Co. v. Michael LaRocca, D.C. et al.***

This case is pending in the United States Court of Appeals for the Eleventh Circuit. State Farm is appealing



a federal district court decision in, focusing on the interpretation of Florida's Health Care Clinic Act (HCCA) and its Wholly Owned Exemption. The case revolves around allegations that Michael LaRocca's chiropractic clinics, operating under the exemption, violated state laws

by providing kickbacks to personal injury attorneys and other referral sources. Despite State Farm's motion for summary judgment being denied, the appeal argues that the district court's decision contradicts the intent of the HCCA and sets a dangerous precedent. If left unchecked, the district court's decision would substantially undermine the purpose of Florida's HCCA by allowing clinics to avoid licensure requirements and operate without being subject to oversight and enforcement. Despite opposition, the Eleventh Circuit allowed the Coalition Against Insurance Fraud and its legal member, Rivkin Radler, LLP to file an *amicus* brief to support State Farm's appeal, as the outcome could significantly impact health care clinic regulation and insurance fraud prevention efforts in Florida and beyond. The appeal has been fully briefed and the parties are waiting for an oral argument date from the Eleventh Circuit.

There is one carryover into 2024 and still pending case in which the Coalition filed an *amicus* brief:

#### ***Taqueria El Primo LLC, et al. v. Farmers Group, Inc., et al.***

This case is pending in the District of Minnesota. This case challenges settlement agreements between Farmers and medical providers suspected by Farmers of PIP billing fraud. Pursuant to these billing moratorium agreements, the medical providers voluntarily agreed to stop billing Farmers or their insureds for varying periods of time into the future. In exchange, Farmer's gave these providers a release from liability for their suspected fraud. A group of plaintiffs now argue that these agreements violate state no-fault laws by impeding access to medical providers, while the Coalition *amicus* brief, filed by Greenberg Traurig, P.A., contends that they are essential for safeguarding consumers from fraudulent practices. Recently, the district court ruled against Farmers, enjoining the enforcement of existing agreements and prohibiting new ones, citing violations of Minnesota's No-Fault Law. Although Farmers secured summary judgment on breach of contract claims, the court allowed plaintiffs



to proceed with claims under the Consumer Fraud Act. Farmers has appealed the decision, seeking a stay of proceedings pending the appeal outcome. An oral argument before the Eighth Circuit Court of Appeals occurred in March 2024, and the parties expect a ruling from the appeals court soon.

**Two recent *amicus* successes include:**

**The Hanover Insurance Group, Inc. and Michael Arline, Jr. v. Luke Frazier**

The lower court ruling has been reversed in Florida's Second District Court of Appeal. The case involved key issues of immunity for reporting insurance fraud and conducting independent investigations by the state Department of Insurance (DOI) and local district attorney's office. Hanover reported suspected insurance fraud from an auto accident to the Florida Division of Investigative and Forensic Services (DIFS), which performed a separate investigation. Based on that investigation, DIFS referred the case to the Hillsborough County District Attorney, which also did a separate, independent investigation resulting in charges against Mr. Frazier, who was found not guilty. Mr. Frazier then sued Hanover and prevailed at trial with a jury verdict exceeding \$120K. It was argued on appeal that Hanover bears no liability, as clearly a good faith basis existed to suspect and report insurance fraud. Greenberg Traurig, P.A. filed an amicus brief on behalf of the Coalition in this matter and the Second District recently reversed the lower court ruling. The brief highlighted the importance of good faith reporting in anti-fraud efforts and the statutory immunity granted for such actions. The appellate court's ruling protects insurers and their employees from liability in these cases, confirming that the lower court erred by not granting statutory immunity.

**Texas Department of Insurance v. Stonewater Roofing**

This matter was not a traditional amicus opportunity. Instead, the Texas Supreme Court allowed amicus letters to be submitted. The issue at hand involved Stonewater Roofing Ltd. challenging a state law preventing roofing contractors from acting as public adjusters. Stonewater argued that this violated their free speech rights. The Coalition Against Insurance Fraud co-signed an amicus letter to the Texas Supreme Court with the National Association of Public Insurance Adjusters (NAPIA), supporting the Texas Department of Insurance's (TDI)

stance and echoing concerns also raised by the American Property Casualty Insurers Association (APCIA), National Association of Mutual Insurance Companies (NAMIC), the Insurance Council of Texas (ICT), and the Texas Association of Public Insurance Adjusters (TAPIA) in their own *amicus curiae* briefs. The Texas Supreme Court found that the law does not impinge on free speech, instead ensuring that public adjusters are licensed and regulated to avoid conflicts when handling property claims. The court's decision aligns with the position that contractors must remain distinct from public adjusters to maintain ethical standards and consumer trust.

The Coalition's *Amicus Curiae* Program is a valuable member benefit and a vital component of our comprehensive strategy to combat fraud. Through these efforts, we actively engage with the legal system to advocate for sound decisions that protect the interests of both insurers and consumers alike. With the backing of these premier law firms, our collective voice becomes even stronger. Together, we are a force to be reckoned with, and we look forward to leveraging the expertise of our member law firms to further fortify our advocacy efforts. The Coalition is always ready to receive requests for this member service. Any requests should adhere to the specific criteria located here on our website. Please reach out to [Brent@insurancefraud.org](mailto:Brent@insurancefraud.org).







Following the Aon Infonar hosted by the Coalition and presented Vince Albers, Senior Manager Aon-STG Performance Benchmarking, Vince presented a condensed SIU Benchmarking Study at the Midyear Meeting, sparking significant interest and engagement among attendees. This comprehensive study that will be shared with our members this August, provides valuable insights into the current state of Special Investigation Units (SIUs) across the industry, highlighting key trends, challenges, and best practices.



The *State of Insurance Fraud Technology Study* currently has no significant developments to report. However, the Committee collaborating with Shift Technology is diligently refining the survey questionnaire. This critical step ensures that we capture the most relevant and insightful data. The Committee is scheduled to reconvene in August to finalize the survey, solidify the communication strategy, and establish a detailed launch schedule. We are committed to ensuring that the survey reaches the right stakeholders and yields valuable insights that can guide our future efforts in combating insurance fraud through technological advancements.



In addition to this ongoing study, the Committee is also partnering with PwC on an exciting new initiative focused on the utilization of AI tools to identify and combat insurance fraud. This study is set to commence this year and promises to provide a fresh perspective on how artificial intelligence can be leveraged in our fight against fraud. The objectives and scope of this study are being carefully crafted to ensure it addresses the unique challenges and opportunities presented by AI, distinguishing it from the broader technology study currently underway.

The AI-focused study will delve into specific applications of AI, exploring how machine learning algorithms, predictive analytics, and other advanced technologies can detect fraudulent activities with greater accuracy and efficiency. As the Committee continues to outline the study's framework, we anticipate that it will offer groundbreaking insights and practical solutions that can be implemented across the insurance industry.



Stay tuned for more updates on both studies as we continue to make progress. We are excited about the potential impact of these initiatives and look forward to sharing our findings with the broader community. Our ultimate goal is to equip insurance professionals with the tools and knowledge they need to stay ahead of fraudsters and protect their organizations and clients from fraud.



# About US :

The [Coalition Against Insurance Fraud](#) is Americas' ONLY anti-fraud alliance speaking for consumers, insurance companies, government agencies and others. Through its unique work, the Coalition empowers consumers to fight back, helps fraud fighters better detect this crime and deters more people from committing fraud. The Coalition supports this mission with a large and continually expanding armory of practical tools: information, research & data, services and insight as a leading voice of the anti-fraud community.

For additional information on the Coalition Against Insurance Fraud contact us at **202-393-7330** or [info@insurancefraud.org](mailto:info@insurancefraud.org)



**Coalition Against  
Insurance Fraud**

**ADVOCACY • INFORMATION • OUTREACH**



# Coalition Against Insurance Fraud



The [Coalition Quarterly](#) is our way of keeping you updated and informed about the work of your Coalition. We value your feedback and suggestions.

We want to provide you the information you need, in the easiest format possible.

Please send your comments and suggestions to:  
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